

Department of Veterans Affairs

§4.116

GYNECOLOGICAL CONDITIONS AND
DISORDERS OF THE BREAST

§4.116 Schedule of ratings—gynecological conditions and disorders of the breast.

	Rating
<p>Note 1: Natural menopause, primary amenorrhea, and pregnancy and childbirth are not disabilities for rating purposes. Chronic residuals of medical or surgical complications of pregnancy may be disabilities for rating purposes.</p> <p>Note 2: When evaluating any claim involving loss or loss of use of one or more creative organs or anatomical loss of one or both breasts, refer to §3.350 of this chapter to determine whether the veteran may be entitled to special monthly compensation. Footnotes in the schedule indicate conditions which potentially establish entitlement to special monthly compensation; however, almost any condition in this section might, under certain circumstances, establish entitlement to special monthly compensation.</p>	
7610 Vulva, disease or injury of (including vulvovaginitis).	
7611 Vagina, disease or injury of.	
7612 Cervix, disease or injury of.	
7613 Uterus, disease, injury, or adhesions of.	
7614 Fallopian tube, disease, injury, or adhesions of (including pelvic inflammatory disease (PID)).	
7615 Ovary, disease, injury, or adhesions of.	
General Rating Formula for Disease, Injury, or Adhesions of Female Reproductive Organs (diagnostic codes 7610 through 7615):	
Symptoms not controlled by continuous treatment	30
Symptoms that require continuous treatment	10
Symptoms that do not require continuous treatment	0
7617 Uterus and both ovaries, removal of, complete:	
For three months after removal	100
Thereafter	150
7618 Uterus, removal of, including corpus:	
For three months after removal	100
Thereafter	130
7619 Ovary, removal of:	
For three months after removal	100
Thereafter:	
Complete removal of both ovaries	
Removal of one with or without partial removal of the other	10
7620 Ovaries, atrophy of both, complete	120
7621 Uterus, prolapse:	
Complete, through vagina and introitus	50
Incomplete	30
7622 Uterus, displacement of:	
With marked displacement and frequent or continuous menstrual disturbances	30
With adhesions and irregular menstruation	10
7623 Pregnancy, surgical complications of:	
With rectocele or cystocele	50
With relaxation of perineum	10
7624 Fistula, rectovaginal:	
Vaginal fecal leakage at least once a day requiring wearing of pad	100
Vaginal fecal leakage four or more times per week, but less than daily, requiring wearing of pad	60

	Rating
Vaginal fecal leakage one to three times per week requiring wearing of pad	30
Vaginal fecal leakage less than once a week	10
Without leakage	0
7625 Fistula, urethrovaginal:	
Multiple urethrovaginal fistulae	100
Requiring the use of an appliance or the wearing of absorbent materials which must be changed more than four times per day	60
Requiring the wearing of absorbent materials which must be changed two to four times per day	40
Requiring the wearing of absorbent materials which must be changed less than two times per day	20
7626 Breast, surgery of:	
Following radical mastectomy:	
Both	180
One	150
Following modified radical mastectomy:	
Both	160
One	140
Following simple mastectomy or wide local excision with significant alteration of size or form:	
Both	150
One	130
Following wide local excision without significant alteration of size or form:	
Both or one	0
Note: For VA purposes:	
(1) <i>Radical mastectomy</i> means removal of the entire breast, underlying pectoral muscles, and regional lymph nodes up to the coracoclavicular ligament..	
(2) <i>Modified radical mastectomy</i> means removal of the entire breast and axillary lymph nodes (in continuity with the breast). Pectoral muscles are left intact..	
(3) <i>Simple (or total) mastectomy</i> means removal of all of the breast tissue, nipple, and a small portion of the overlying skin, but lymph nodes and muscles are left intact..	
(4) <i>Wide local excision</i> (including partial mastectomy, lumpectomy, tylectomy, segmentectomy, and quadrantectomy) means removal of a portion of the breast tissue..	
7627 Malignant neoplasms of gynecological system or breast	100

	Rating
<p>Note: A rating of 100 percent shall continue beyond the cessation of any surgical, X-ray, antineoplastic chemotherapy or other therapeutic procedure. Six months after discontinuance of such treatment, the appropriate disability rating shall be determined by mandatory VA examination. Any change in evaluation based upon that or any subsequent examination shall be subject to the provisions of § 3.105(e) of this chapter. If there has been no local recurrence or metastasis, rate on residuals.</p> <p>7628 Benign neoplasms of the gynecological system or breast. Rate according to impairment in function of the urinary or gynecological systems, or skin.</p> <p>7629 Endometriosis:</p> <p>Lesions involving bowel or bladder confirmed by laparoscopy, pelvic pain or heavy or irregular bleeding not controlled by treatment, and bowel or bladder symptoms 50</p> <p>Pelvic pain or heavy or irregular bleeding not controlled by treatment 30</p> <p>Pelvic pain or heavy or irregular bleeding requiring continuous treatment for control 10</p> <p>Note: Diagnosis of endometriosis must be substantiated by laparoscopy.</p>	

¹ Review for entitlement to special monthly compensation under § 3.350 of this chapter.

[60 FR 19855, Apr. 21, 1995, as amended at 67 FR 6874, Feb. 14, 2002; 67 FR 37695, May 30, 2002]

THE HEMIC AND LYMPHATIC SYSTEMS

§ 4.117 Schedule of ratings—hemic and lymphatic systems.

	Rating
<p>7700 Anemia, hypochromic-microcytic and megaloblastic, such as iron-deficiency and pernicious anemia:</p> <p>Hemoglobin 5gm/100ml or less, with findings such as high output congestive heart failure or dyspnea at rest 100</p> <p>Hemoglobin 7gm/100ml or less, with findings such as dyspnea on mild exertion, cardiomegaly, tachycardia (100 to 120 beats per minute) or syncope (three episodes in the last six months) 70</p> <p>Hemoglobin 8gm/100ml or less, with findings such as weakness, easy fatigability, headaches, lightheadedness, or shortness of breath 30</p> <p>Hemoglobin 10gm/100ml or less with findings such as weakness, easy fatigability or headaches 10</p> <p>Hemoglobin 10gm/100ml or less, asymptomatic 0</p> <p>Note: Evaluate complications of pernicious anemia, such as dementia or peripheral neuropathy, separately.</p> <p>7702 Agranulocytosis, acute:</p> <p>Requiring bone marrow transplant, or; requiring transfusion of platelets or red cells at least once every six weeks, or; infections recurring at least once every six weeks 100</p>	

	Rating
<p>Requiring transfusion of platelets or red cells at least once every three months, or; infections recurring at least once every three months 60</p> <p>Requiring transfusion of platelets or red cells at least once per year but less than once every three months, or; infections recurring at least once per year but less than once every three months 30</p> <p>Requiring continuous medication for control 10</p>	

NOTE: The 100 percent rating for bone marrow transplant shall be assigned as of the date of hospital admission and shall continue with a mandatory VA examination six months following hospital discharge. Any change in evaluation based upon that or any subsequent examination shall be subject to the provisions of § 3.105(e) of this chapter.

<p>7703 Leukemia:</p> <p>With active disease or during a treatment phase 100</p> <p>Otherwise rate as anemia (code 7700) or aplastic anemia (code 7716), whichever would result in the greater benefit.</p>	
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NOTE: The 100 percent rating shall continue beyond the cessation of any surgical, radiation, antineoplastic chemotherapy or other therapeutic procedures. Six months after discontinuance of such treatment, the appropriate disability rating shall be determined by mandatory VA examination. Any change in evaluation based upon that or any subsequent examination shall be subject to the provisions of § 3.105(e) of this chapter. If there has been no recurrence, rate on residuals.

<p>7704 Polycythemia vera:</p> <p>During periods of treatment with myelosuppressants and for three months following cessation of myelosuppressant therapy 100</p> <p>Requiring phlebotomy 40</p> <p>Stable, with or without continuous medication 10</p>	
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NOTE: Rate complications such as hypertension, gout, stroke or thrombotic disease separately.

<p>7705 Thrombocytopenia, primary, idiopathic or immune:</p> <p>Platelet count of less than 20,000, with active bleeding, requiring treatment with medication and transfusions 100</p> <p>Platelet count between 20,000 and 70,000, not requiring treatment, without bleeding 70</p> <p>Stable platelet count between 70,000 and 100,000, without bleeding 30</p> <p>Stable platelet count of 100,000 or more, without bleeding 0</p> <p>7706 Splenectomy 20</p>	
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NOTE: Rate complications such as systemic infections with encapsulated bacteria separately.

<p>7707 Spleen, injury of, healed. Rate for any residuals.</p> <p>7709 Hodgkin's disease: With active disease or during a treatment phase 100</p>	
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NOTE: The 100 percent rating shall continue beyond the cessation of any surgical, radiation, antineoplastic chemotherapy or other therapeutic procedures. Six months after discontinuance of such treatment, the appropriate disability rating shall be determined by mandatory VA examination. Any change in evaluation based upon that or any subsequent examination shall be subject to the provisions of § 3.105(e) of this chapter. If there has been no local recurrence or metastasis, rate on residuals.